



#124
03-097

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | |
|--|-------------------------|
| Application No. | 10/696,845 |
| Filing Date | October 29, 2003 |
| First Named Inventor | Stephen P. MANGIN |
| Examiner Name | PRONE, Christopher D. |
| Group Art Unit | 3738 |
| Total Number of Pages in This Submission | 11 |
| Attorney Docket No. | A-72194/ENB (449346-98) |

ENCLOSURES (check all that apply)

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, No. of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|-------------------------|--|-----------------------|
| Firm or Individual name | Edward N. Bachand Dorsey & Whitney LLP 555 California Street, Suite 1000 San Francisco, CA 94104-1513 Telephone No.: (650) 857-1717 Facsimile No.: (650) 857-1288 | Customer Number 32940 |
| Signature | | |
| Date | March 28, 2006 | |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 3-28-06

| | | | |
|-----------------------|------------------|------|----------------|
| Typed or printed name | Laura Lee Mosier | | |
| Signature | | Date | March 28, 2006 |